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2009 MAY 25 PM 4: 25

Dep & RQ4 405#

03500.014241

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

NOBUHIRO ITO

Application No.: 09/505,627

Filed: February 16, 2000

For: MANUFACTURING METHOD

OF ELECTRON BEAM

APPARATUS AND SPACER,

APPARATUS AND SPACER, —)
AND ELECTRON BEAM :

APPARATUS) May 18, 2004

COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

REQUEST FOR REFUND

Sir:

In connection with the above-identified application, Applicant requests a refund of \$110.00 for a one month extension fee, which was erroneously charged to our Deposit Account 06-1205. It is requested that the refund be applied as a credit to that Deposit Account. The reason for the refund is explained below.

On February 2, 2004, Applicant submitted an Amendment (see attached copies of the Amendment and a postcard acknowledging receipt of the Amendment) in response to the Office Action mailed on October 31, 2003. Since January 31, 2004 was a Saturday, no extension fees were due at the time the Amendment was filed.

Adjustment date: 07/12/2004 EEKUBAY1 03/24/2004 VSEAFORT 00000001 861205. 09505627 01 FC:1251 110.00 CR

2011 MAY 25 PM 4: 25

Applicant's attorneys received a Monthly Statement of Deposit Account, dated March 31, 2004, (copy attached) indicating that Deposit Account No. 06-1205 was charged \$110.00. It is respectfully submitted that this charge is not warranted.

Accordingly, Applicant hereby requests a refund and authorizes the Commissioner to credit Deposit Account No. 06-1205 in the amount of \$110.00, to resolve this matter.

Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our below listed address.

Respectfully submitted,

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3801 Facsimile: (212) 218-2200

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	Date 200,014241	
	Commissioner for Parents Any. Docket 02500.014241 Application No. 9/505, 627 Application No. 9/505, 627	
	P.O. Box 1450 22313-145	
	Sir: Kindly acknowledge receipt 10 31 (claims fee) Kindly acknowledge receipt 10 31 (claims fee) Check for \$ documents	
	Check for pro-1449 and	
3	Detuon Petuon P	,
	by placing your receiving date stamp Due Date Mo. Day V. LSaturda Y LSaturda Y	
	Atty.	